



**PROSTHETICS
ADMINISTRATIVE HOME OXYGEN
MODULE
USER MANUAL**

Version 3.0

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Department of Veterans Affairs
VISTA Technical Services

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1. Introduction

Overview

The Administrative Home Oxygen Module is exclusively an administrative system. It provides for the recording of patient information for reporting and invoice billing which can be used as a check against bills received from the contractor for each patient. The module facilitates the coordination of services when contractors change at the end of a contract cycle. It also provides correspondence support to remind patients when they need to renew their Home Oxygen prescriptions.

The Administrative Home Oxygen module is mainly used to manage billing from the vendor, providing several benefits, including saving money by suspending erroneous charges and time by eliminating a manual review of the records. The module also provides information about the current prescription of the patient, and flags patients with special problems quickly.

Correspondence may be required by local VAMC Home Oxygen program policy. With this release, letters may be sent to patients when prescriptions are due to expire or when service is discontinued.

New Administrative Home Oxygen Options

Add/Edit Home Oxygen Patient: This option allows you to add patients to the Prosthetics Patient file and document home oxygen prescription data and the equipment that is to be used by the patient.

Inactivate/Activate Oxygen Patient: If the patient is no longer receiving home oxygen or treatment has been interrupted for an extended length of time, inactivate the patient using this option. The option allows you to record a date of inactivation and a coded reason for the inactivation. This option is also used to re-activate a patient. Reactivating the patient changes the Home Oxygen Activation Date for the patient.

Generate Letters: This option generates a list of patients that meet the criteria (number of days prior to prescription expiry) for receiving a letter.

Billing Transactions: This option allows you to edit bills for a specific month, accept those transactions, post and sign-off on them.

Reports:

Alphabetical List Home Oxygen Patients (by site): This is a listing of active home oxygen patients for a selected site. The report also shows the date the current prescription expires.

Active Home Oxygen Patients (Alpha by Zip Code): This is a listing of active patients with their address information.

Prescription Expiration Dates: This is a listing of active patients sorted by the expiration dates for their current prescriptions.

Inactive Home Oxygen Patients (by Inactive date): This is a listing of inactive patients and the reason they were inactivated.

Primary Item Report: This is a report of active patients listing the primary item, quantity of the item, and cost.

Monthly Home Oxygen Billing: This report lists billings for all active home oxygen patients.

New Patients: This is a report of all new patients for a selected date range.

Prescription Report: This report includes HCPCS/items, quantity, cost, extended cost, and the fund control point.

Pre-Billing Discrepancy Report: This report should be run and any discrepancies corrected prior to creating a billing list for a month. If there are any discrepancies for a patient, then that patient will not appear on the billing list.

Site Parameters Enter/Edit: This option is used to enter site specific information regarding default days to expiration for prescription, letters, vendors, and Fund Control Points.

Verify Posted Billing Transactions: This option posts all Home Oxygen billing transactions for a selected month for bills posted in IFCAP that were not also posted in Patient 2319 records. It will loop through all the records for the month and vendor entered.

Purchase Card Sign Off: Once a billing is accepted and posted, this option can be used to sign off on the billing.

List Manager Functions

List Manager is used in the Billing Transactions and Generate Letters options. Its functions provide the ability to move around between screens, search for selected pieces of information, and print the information on the screen(s). A list of the functions for each option can be obtained at the "Select ACTION" prompt by entering two question marks (??). The List Manager functions are shown in bold below.

Billing Transactions				Mar 04, 1999 14:19:56			Page: 1 of 29	
Billing Transactions for HOME HEALTH CARE SERVICES INC for FEB 1999								
	NAME	SSN	EL	PRIMARY ITEM	910	OTHER	SUSP	TOTAL
1.	AAAAAABBBBB	2020	4	O2 TANK H SYSTEM	40.00	0.00	0.00	40.00
2.	ABBBBBBBB,A	1111	1	O2 CONCENTRATOR	325.00	300.00	0.00	625.00
3.	ACCCCCCCC,C	3333	4	O2 NEBULIZER/BUNN SYS	150.00	0.00	0.00	150.00
4.	ADDDDDDDDD	4444	4	O2 CONCENTRATOR	182.50	0.00	0.00	182.50
5.	AFF,JULIUS	5555	4	O2 CONCENTRATOR	162.50	45.00	0.00	207.50
6.	AGGGG,BILL	6666	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
7.	BAAAAAA,FRE	7777	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
8.	BBBBBBB,J D	8888	4	O2 CONCENTRATOR	182.50	330.00	0.00	512.50
9.	BCCCCC,KENN	9999	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
10.	BDDDDDD,JON	1010	4	O2 CONCENTRATOR	182.50	228.00	0.00	410.50
Enter ?? for more actions								

Select ACTION:Next Screen// ??

ET	Edit Patient	AP	Add Billing Patient	UB	Unaccept Billing
EB	Edit Billing	CV	Change View	XB	Post Billing
AB	Accept Billing	QE	Quick Edit		
23	Display 2319	SO	Sign Off Purchase Card		

The following actions are also available:

+	Next Screen	FS	First Screen	SL	Search List
-	Previous Screen	LS	Last Screen	ADPL	Auto Display(On/Off)
UP	Up a Line	GO	Go to Page	QU	Quit
DN	Down a Line	RD	Re Display Screen		
>	Shift View to Right	PS	Print Screen		
<	Shift View to Left	PL	Print List		

Next Screen: Enter + to move to the next screen.

Previous Screen: Enter - to go back to the previous screen.

Up a Line: (Not used in this version)

Down a Line: (Not used in this version)

Shift View to Right: (Not used in this version)

Shift View to Left: (Not used in this version)

First Screen: Enter FS to return to the first screen.

Last Screen: Enter LS to go forward to the final screen.

Go to Page: Enter GO to select the screen number you want to see.

Re Display Screen: Enter RD to re-display the screen.

Print Screen: Enter PS to get a device to print what you see on the screen.

Print List: Enter PL to get a device to print the data on the screen.

Search List: Enter SL to find a specific piece of information:

Select ACTION:Quit// **s1** SL
Search for: **OXYGEN**

Billing Transactions Jul 12, 1999 11:02:32 Page: 1 of 1
Billing Transactions for HOLLISTER INC.
for JUN 1999

	NAME	SSN	EL	PRIMARY ITEM	910	OTHER	SUSP	TOTAL
1.	ABCEK,ANN	8476	4	TANKS E PORTABLES	1755.00	0.00	0.00	1755.00
2.	ABFY,HERBER	7641	4	OXYGEN HOSE UNION	518.75	0.00	0.00	518.75
3.	BUGS,BUNNY	5555	4	TANKS E PORTABLES	320.00	0.00	0.00	320.00
4.	MICKEY,MOUS	9999	4	OXYGEN	0.00	1000.00	0.00	1000.00
5.	TEST,BARNEY	7777	1	OXYGEN	90.00	0.00	0.00	90.00
6.	TEST,JOE	9999	1	OXYGEN HOSE UNION	80.00	0.00	0.00	80.00

Your search criteria is highlighted on the screen.

Auto Display (On/Off): Enter ADPL to either display or hide the Letter or Billing actions you can take.

Billing Transactions				Mar 04, 1999 14:19:56			Page: 1 of 29	
Billing Transactions for HOME HEALTH CARE SERVICES INC for FEB 1999								
	NAME	SSN	EL	PRIMARY ITEM	910	OTHER	SUSP	TOTAL
1.	AAAAAABBBBB	2020	4	O2 TANK H SYSTEM	40.00	0.00	0.00	40.00
2.	ABBBBBBBB,A	1111	1	O2 CONCENTRATOR	325.00	300.00	0.00	625.00
3.	ACCCCCCCC,C	3333	4	O2 NEBULIZER/BUNN SYS	150.00	0.00	0.00	150.00
4.	ADDDDDDDDD,	4444	4	O2 CONCENTRATOR	182.50	0.00	0.00	182.50
5.	AFF,JULIUS	5555	4	O2 CONCENTRATOR	162.50	45.00	0.00	207.50
6.	AGGGG,BILL	6666	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
7.	BAAAAAA,FRE	7777	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
8.	BBBBBB,J D	8888	4	O2 CONCENTRATOR	182.50	330.00	0.00	512.50
9.	BCCCCC,KENN	9999	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
10.	BDDDDDD,JON	1010	4	O2 CONCENTRATOR	182.50	228.00	0.00	410.50
Enter ?? for more actions								
Select ACTION:Next Screen// ADPL ADPL								

Do you wish to turn auto-display 'ON' for this menu? NO// **YES**

Billing Transactions				Mar 04, 1999 14:19:56		Page:		1 of 29	
Billing Transactions for HOME HEALTH CARE SERVICES INC for FEB 1999									
	NAME	SSN	EL	PRIMARY	ITEM	910	OTHER	SUSP	TOTAL
1.	AAAAAABBBBB	2020	4	O2	TANK H SYSTEM	40.00	0.00	0.00	40.00
2.	ABBBBBBBB,A	1111	1	O2	CONCENTRATOR	325.00	300.00	0.00	625.00
3.	ACCCCCCCC,C	3333	4	O2	NEBULIZER/BUNN SYS	150.00	0.00	0.00	150.00
4.	ADDDDDDDDD,	4444	4	O2	CONCENTRATOR	182.50	0.00	0.00	182.50
5.	AFF,JULIUS	5555	4	O2	CONCENTRATOR	162.50	45.00	0.00	207.50
6.	AGGGG,BILL	6666	4	O2	CONCENTRATOR	162.50	90.00	0.00	252.50
7.	BAAAAAA,FRE	7777	4	O2	CONCENTRATOR	162.50	90.00	0.00	252.50
8.	BBBBBBB,J D	8888	4	O2	CONCENTRATOR	182.50	330.00	0.00	512.50
9.	BCCCCC,KENN	9999	4	O2	CONCENTRATOR	162.50	90.00	0.00	252.50
10.	BDDDDDD,JON	1010	4	O2	CONCENTRATOR	182.50	228.00	0.00	410.50
Enter ?? for more actions									
ET	Edit Patient			AP	Add Billing Patient	UB	Unaccept Billing		
EB	Edit Billing			CV	Change View	XB	Post Billing		
AB	Accept Billing			QE	Quick Edit				
23	Display 2319			SO	Sign Off Purchase Card				
Select ACTION:Quit//									

Quit: Enter QU to return to exit the option.

2. Setting Up the Site Parameters

Before setting up the site parameters, you need to make decisions concerning correspondence and sequence numbering of prescriptions. You also need to gather information on Fund Control Points and vendors.

Information Needed for the Site Parameters

Correspondence

Your medical center policy may require that letters be sent under certain circumstances to patients receiving home oxygen and/or to the contractor: e.g., when a patient is added to the program, when a prescription is about to expire, and/or when the service is discontinued. If you want to automate this process, the Home Oxygen Module provides the means. Add the letters to the Prosthetic software using the option Add/Edit Correspondence Skeleton Letter found under the Correspondence menu of the Prosthetic Official's Menu. This should be done prior to editing the site parameters in the option Site Parameters Enter/Edit under the Home Oxygen Main Menu. Here's an example of how use the Add/Edit Correspondence Skeleton Letter option:

```
Select Correspondence Option:  Add/Edit Correspondence Skeleton Letter
Select PROS LETTER NAME:  PRESCRIPTION EXPIRATION
Are you adding 'PRESCRIPTION EXPIRATION' as a new PROS LETTER (the 7TH)? No//
Y (Yes)
NAME: PRESCRIPTION EXPIRATION// <RET>
LETTER TEXT:
    No existing text
    Edit? NO// YES

==[ WRAP ]==[ INSERT ]=====< LETTER TEXT >===== [ <PF1>H=Help ]====
Enter the content of the body of your letter here.

<=====T=====T=====T=====T=====T=====T=====T=====T=====T=====T>=====T

Is this a Denial type of letter? No// <RET> (No)
```

Once you have created your letters, determine the following about each letter for the Home Oxygen Site Parameters:

1. Give the letter one of the following letter codes:
 - A LETTER 1
 - B LETTER 2
 - C LETTER 3
2. Determine the number of days prior to the expiration (Days to Expiry) of the prescription that the letter should be created. Examples: A letter to remind a patient to renew a prescription might be sent 30 days prior to the expiration of the prescription. In the case of a welcome letter, enter 0 days to create the letter on the day the prescription is entered.

3. Should the letter be auto-generated or would you rather manage the creation of letters? Auto-generating means that whenever you run the Generate Letters option, a list of patients is created who meet the criteria for the number of days prior the prescription expiration. Letters can be automatically generated from that list.
4. Do you want a header printed on the letter? If you use pre-printed paper that has a letterhead, then you would answer No to this question. If you want a header to print along with the letter content, then you would answer Yes to this question.

Worksheet for defining letter management

Long Name	Letter Code	Days to Expiry	Auto-Gen Y/N	Print Header Y/N

Home Oxygen Vendors

Create a list of the vendors your site uses for providing home oxygen equipment.

Fund Control Points

Create a list of the Fund Control Points (FCP) used for Home Oxygen. There should be **at least one** FCP for 910. Many sites will also have a local number for the liquid gas.

To obtain the FCPs, you can use the Prosthetics package option, Create a No-Form Daily Record, under the Enter New Request menu in Purchasing. At the "Select CONTROL POINT" prompt, enter two question marks to obtain a list of the FCPs used by the Prosthetics and Sensory Aids Service at your site.

Sequence Numbering of Prescriptions

Those sites with local policy that defines the length of time the first, second, third, etc. prescriptions are good, may want to take advantage of a default prescription expiry date. Sequence numbering starts with 1 and increases by one for each new prescription. If the first prescription (sequence number 1) at your site cannot exceed 3 months, then its Default Days to Expiration would be 90 (days). If the second and all further prescriptions cannot exceed 6 months, then sequence number 2 and all the following sequence numbers would be given 180 for Default Days to Expiration. If you choose to use this functionality, adding 5-6 sequence numbers should be sufficient. If you choose not to use default dates, the prescription's "Expiration Date" field can be entered by hand.

Site Parameters Enter/Edit Option

Once you have all the above defined for each site, use the Site Parameters Enter/Edit option and enter the information. The following shows the order of the prompts and a brief description of what you should enter:

Site: Select the site for the parameters you are defining.

Prescription Sequence Number: Start with 1 and increment by 1 for each sequence number you enter. The first prescription when a patient is activated is sequence number 1, the second sequence number 2, etc. You are not required to use this functionality and may bypass the prompt by pressing the <ret> key.

Default Days to Expiration: If you enter a Sequence number, then you will be asked to enter the Default Days to Expiration. The program will look at the date entered for a prescription, check the sequence number of the prescription, add the Default Days to Expiration to the prescription date, and come up with a default response to the Expiration Date prompt for the prescription. This default response may be accepted or changed.

Fund Control Point: Enter each Fund Control Point used by your home oxygen program. These Fund Control Points will be displayed on reports that show statistics by Fund Control Point.

PSAS?: Is this Fund Control Point a Prosthetics Sensory and Aids Service FCP?
Enter Yes if the FCP is 910.
Enter No for all local FCPs.

Home Oxygen Vendors: Enter each vendor that provides home oxygen services for your patients.

Home Oxygen Letter: Enter the name of each letter you created using the Add/Edit Correspondence Skeleton Letter option.

Letter Code: Select one of the following codes:

- A LETTER 1
- B LETTER 2
- C LETTER 3

Days to Prescription Expiry: Enter the number of days prior to the expiration of the prescription that you want to print the letter to send to the patient. Examples: A letter to remind a patient to renew a prescription might be sent **30** days prior to the expiration of the prescription. In the case of a welcome letter, enter **0** days to create the letter on the day the first prescription is entered.

Autogenerate Letter: If you want to be able to obtain a list of patients who meet the criteria for receiving this letter you just defined, enter YES at this prompt.

Print Letter Header: For those sites that print letters on paper already containing a letterhead, enter No at this prompt. For those sites that want to use the on-line letterhead, enter Yes at this prompt.

3. Entering Patient and Prescription Information

In order to bill patients, the program must have information concerning the patient, the patient's prescriptions, and the items being billed to the patient. It needs to know when a patient starts on the program and when the patient is no longer active.

This chapter shows you how to do the following:

- **Add patients to the program** (Add/Edit Home Oxygen Patient option)
- **Enter or change prescription information** (Add/Edit Home Oxygen Patient option)
- **Create or change the billing equipment list for a patient** (Add/Edit Home Oxygen Patient option)
- **Inactivate patients from the program** (Inactivate/Activate Oxygen Patient option)
- **Generate letters** (Generate Letters option)

Add/Edit Home Oxygen Patient

Use this option to:

- Add a new patient**
- Edit the patient's eligibility**
- Activate the patient**
- Add a new prescription**
- Add or edit a billing item**

There are three basic sets of data covered in this option.

The first set is demographic in nature and includes the prosthetics site, the date the patient was activated/reactivated to the Home Oxygen program, and the patient's eligibility.

A second set of data is for each prescription and includes the first and subsequent prescription dates, a description what was ordered for the patient, and the prescription expiration date.

The third set of data is called a "billing equipment list". The billing equipment list is used to record the items that are provided on a monthly basis to the patient. Information that will allow costs to flow through to the correct obligation such as the fund control point (FCP) number will be included as well.

The following shows the order of the prompts and a brief description of what you should enter:

Site: This prompt only appears if your Prosthetics Service covers multiple stations.
Enter a site.

Prosthetics Patient Name: Enter the patient name in the usual manner: LAST,FIRST or first initial last name plus last 4 digits of the SSN, etc.
Note: This prompt also accepts an item name. If you enter a single letter or the item name, the program searches through a list of items that have been given to patients.

Add a New Patient

The Home Oxygen Module will first search the Prosthetics Patient file for the patient. If the patient isn't there, it will search the VISTA Patient file and ask if you want to add the patient as a new Prosthetics Patient. Enter Yes to add the patient as a new Prosthetics Patient.

Prosthetics Patient Station: If this patient is a new Prosthetics Patient, you must also enter a site for the patient.

Edit the Patient's Eligibility

Home Oxygen Eligibility: Enter the patient's eligibility for home oxygen services.

Note: When selecting NSC/OP you may see additional prompts.

- 1 SC/OP
- 2 SC/IP
- 3 NSC/IP
- 4 NSC/OP

Home Oxygen Contract Location: Enter the site that will be administering the contract for the home oxygen.

Activate the Patient

Home Oxygen Activation Date: Enter the latest date the patient was activated as a home oxygen patient. This may be the first date on the program or the most recent activation date following an extended time off the program. An exact date is not required. You may enter a month, day and year or just a month and year. (E.g., 2/2/99, 2/99) Each Activation Date begins a sequence of prescriptions. If you are using this functionality, the earliest prescription date is sequence number 1.

Add a New Prescription

Home Oxygen Prescription Date: Enter the prescription date here.

Note: It is strongly suggested that you do not delete prescription dates.

If this is a new prescription, you will be asked if you are adding a new one. Answer Yes.

Expiration Date: Enter the expiration date of the prescription. If in the site parameters for the Home Oxygen Module, prescription sequence numbers and default days to expiration were defined, then you may see a default answer here. You may accept the default date or edit it.

Description: Enter a description of how often to use, flow rate, how administered, etc. according to the prescription.

Example: 2 LPM O2 by N/C 24hr/d w/conc 6E, 2D, H

Note: If no equipment has been entered for this patient, you will receive a message stating:

No items found, please enter PRIMARY ITEM

Otherwise, a list of the patient's oxygen equipment appears next with the primary equipment item starred (*). You have a choice of adding a new item, deleting an item or editing an item.

The following items are already in this patient's template:

```
*      1  TANKS E PORTABLES          VENDOR INC.
      2  OXYGEN                      VENDOR INC.
```

* = Primary Item

Select ACTION: (A/D/E):

Add or Edit a Billing Item

Pros Item Master Name: Select an item from the Prosthetics Master Item list. If this is the first item added, it should be the Primary item (primary component or system) that the patient will be receiving. The primary item is sometimes used on reports in lieu of listing all items.

Primary Item: For each additional item entered, you will be asked if it is the primary item. If you have already entered a primary item, then answer NO at this prompt.

HCPCS Code: Enter the HCPCS code for the item selected.

Vendor: Enter the vendor that will be supplying the equipment and services.

Quantity: Enter the number authorized to be issued to the patient during the month. Example: For liquid oxygen, enter the number of pounds of liquid.

Unit Cost: Enter the cost for each unit issued. Type a dollar amount with 2 decimal digits.

Note: The program will use the Quantity and Unit Cost to calculate the total amount for billing.

Unit of Issue: Select a unit of issue.

ICD9 Code: Enter the diagnosis that is most closely related to the reason this patient is receiving oxygen.

Remarks: Enter any further information about this patient, up to 30 characters. This information is displayed on the patient's 2319 record on screen 8.

Example: Equip used in conj with CPAP

Item Type: Is this an initial issue (I), replacement (R), or repair (X)? If this is a 910 issue, enter X. If this is out of a local FCP, enter either I or R.

Fund Control Point: Through which FCP will this purchase be handled? Enter the FCP here.

At this point you may edit the data you entered, add a new item for this prescription, or delete an item.

Example:

```
SITE: HINES ISC VAMC// <ret>                                499

Select PROSTHETICS PATIENT NAME: ABCEK,ANN                01-05-32    422458476
NO      EMPLOYEE
      ...OK? Yes// <ret>  (Yes)
      SUPPORT ISC

HOME OXYGEN ELIGIBILITY: 4 NSC/OP
HOME OXYGEN CONTRACT LOCATION: HINES ISC VAMC// <ret>
HOME OXYGEN ACTIVATION DATE: JUL 1,1999// <ret>  (JUL 01, 1999)
Select HOME OXYGEN PRESCRIPTION DATE: t    JUL 01, 1999
  Are you adding 'JUL 01, 1999' as a new HOME OXYGEN PRESCRIPTION (the 1ST for this
  PROSTHETICS PATIENT)? No// y (Yes)
  DATE: JUL 1,1999// <ret>                                (Note: Prescription dates should not be deleted.)
  EXPIRATION DATE: SEP 29,1999// <ret>  (SEP 29, 1999) (Note: The default date was
  defined in the Site Parameters as 90 days for the prescription sequence #1.)
  DESCRIPTION:
    No existing text
    Edit? NO// y YES

==[ WRAP ]==[ INSERT ]===== < DESCRIPTION >===== [ <PF1>H=Help ]====
2 LPM O2 by N/C 24hr/d w/conc 6E, 2D, H.

<=====T=====T=====T=====T=====T=====T=====T=====T=====T=====T=====
No items found, please enter PRIMARY ITEM

Select PROS ITEM MASTER NAME: TANKS E PORTABLES  12381      TANKS E PORTABLES

      ...OK? Yes// <ret>  (Yes)
ITEM: TANKS E PORTABLES// <ret>
HCPCS CODE: TANKS  VA111      CONSERVER, OXYGEN
VENDOR: VENDOR INC.          PH:708 700-7000  NO: 70000
ORD ADD:  10 FAIRWAY DRIVE      FMS:
          CHICAGO, IL 60000      CODE:          FAX:

      ...OK? Yes// <ret>  (Yes)
QUANTITY: 6
UNIT COST: 40
UNIT OF ISSUE: EACH  EA      EACH
ICD9 CODE: 416.8      CHR PULMON HEART DIS NEC
      ...OK? Yes// <ret>  (Yes)
REMARKS: <ret>
ITEM TYPE: X  Repair
Select FUND CONTROL POINT: 910 PROSTHETIC SERVICES

The following items are already in this patient's template:

*    1  TANKS E PORTABLES          VENDOR INC.

* = Primary Item

Select ACTION:  (A/D/E): Add
```

Inactivate/Activate Oxygen Patient

Use this option to:

Inactivate a Home Oxygen Patient

Activate a Home Oxygen Patient

Inactivate patients for any of the following reasons:

Discontinued by Patient

Rx Expired

MD Discontinued

Patient Deceased

Inpatient Status

Entered in Error

Note on Inpatient Status: For those patients who are often admitted as an inpatient to manage their condition but whose stay is generally not lengthy, they do not need to be inactivated. Use the Inpatient Status only when it is apparent that their stay will be lengthy and that they may not return to the Home Oxygen Program.

When an Inactivation Date and Inactivation Reason are recorded for a patient, the patient is inactivated causing the last prescription in the patient's file to be canceled.

When a patient is reactivated, the Inactivation date is deleted. When the inactivation date is deleted, the reason for inactivation is automatically deleted by the system. The prescription will remain unchanged unless it is directly edited in the Add/Edit Home Oxygen Patient option.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Enter a site.

Prosthetics Patient Name: Enter the patient name in the usual manner: LAST,FIRST or first initial last name plus last 4 digits of the SSN, etc. Note: If you enter a single letter, the program searches through a list of items given to patients.

Home Oxygen Inactivation (or Activation) Date: Enter the date the patient is either inactivated or activated.

Home Oxygen Inactivat. Reason: If the patient is being inactivated, this prompt will appear. Select the reason the patient is being inactivated.

D Discontinued by Patient

R Rx Expired

M MD Discontinued

P Patient Deceased

I Inpatient Status

E Entered in Error

Example:

SITE: HINES ISC VAMC// <ret> 499
 Select PROSTHETICS PATIENT NAME: ABCEK,ANN SUPPORT ISC 01-05-32
 422458476 NO EMPLOYEE
 Are you sure you want to inactivate ABCEK,ANN ?? NO// y YES
 HOME OXYGEN INACTIVATION DATE: TODAY// <ret> (JUL 01, 1999)
 HOME OXYGEN INACTIVAT. REASON: ??
 Enter a code (P, R, M, D, I, or E) for the reason for discontinuance of home
 oxygen therapy.
 Choose from:
 D DISCONTINUED BY PATIENT
 R Rx EXPIRED
 M MD DISCONTINUED
 P PATIENT DECEASED
 I INPATIENT STATUS
 E ENTERED IN ERROR
 HOME OXYGEN INACTIVAT. REASON: p PATIENT DECEASED
 Select PROSTHETICS PATIENT NAME: <ret>

Generate Letters

If you set up your site parameters to auto-generate your letters, this option will build of list of patients who meet the criteria for receiving each type of letter (e.g., recently activated, within so many days of the expiration of their prescription, about to be discontinued from the home oxygen program).

Note: Once you print a letter for a patient, the patient will no longer appear on the list for that type of letter. So if you print a welcome letter for a patient, that patient will no longer appear as needing a welcome letter. Use the option Print/Display Patient Correspondence Letter under the Correspondence menu within the Prosthetic Official's Menu if you need to reprint the letter.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Enter a site.

If your current list is not so current, then generate a new list as shown here. This will place any patients on the list that have met the criteria since the last list was generated:

```
Do you wish to manage the current list? No// <ret> (No)
Do you wish to generate a new list which will discard any edits? No// Y (Yes)
```

RMPO LETTER TYPE		Mar 09, 1999 08:57:06	Page: 1 of 1
HINES ISC VAMC			
HOME OXYGEN PATIENT LETTER TYPE LIST			
Description		Number of Patients on List	
1	LETTER 1	3	
2	LETTER 2	5	
3	LETTER 3	1	
Enter ?? for more actions			

```
ML  Manage Letter List  LT  Print Letters
Select Action: Quit// LT  Print Letters
Select letter type line #: (1-3): 1
```

ML Manage Letter List: This functionality generates a new list, adding any patients that meet the criteria.

```
Select Action: Quit// ml  Generate Letter List
Select letter type line #: (1-3): 2
Generating a new list... .
DONE GENERATING A NEW LIST...
```

LT Print Letters: This functionality lets you add patients, print the letters for all or selected patients, and delete entries.

Select Action: Quit// **LT** Print Letters
 Select letter type line #: (1-3): **1**
 Processing....

RMPO LETTER		Mar 09, 1999 08:57:24		Page: 1 of 1	
WELCOME TO HOME OXYGEN					
HOME OXYGEN PATIENT LETTER LIST					
Patient	SSN	Primary Item	Activation Date	Rx	Expiry
1 PHHHHH	755-55-5555	O2 CONCENTRATOR	MAR 06, 1999	JUN 04, 1999	
2 YAAAA	123-12-1234	O2 CONCENTRATOR	MAR 08, 1999	JUN 06, 1999	
3 ZEEEE	345-34-3456	O2 CONCENTRATOR	MAR 08, 1999	JUN 06, 1999	
Enter ?? for more actions					

AP	Add Patient to the list	PP	Print a letter for one patient
DE	Delete List Entry	X	Exit to Letter
AL	Print all letters		

AP Add Patient to the list: Use this action if you want to add a patient to the list to receive a letter.

Select Action: Quit// **ap** Add Patient to the list

Select PROSTHETICS PATIENT NAME: **NAME,PATIENT**

DE Delete List Entry: This allows you to delete selected entries.

Select Action: Quit// **DE** Delete List Entry
 Enter lines to delete: (1-2): **1**

AL Print All Letters: This sends all the letters in the list to a selected Device.

Select Action: Quit// **AL** Print all letters
 DEVICE: HOME//

PP Print a letter for one patient: You may send a letter for one or more selected patients to a selected Device. Enter your selections singly or in a range (e.g., 3,6,7,8 or 3,6-8, etc.)

Select Action: Quit// **PP** Print a letter for one patient
 Enter a list or range of numbers (1-2): **1**
 DEVICE: HOME//

Device: Enter a printer name. This will **not** allow you to print to the screen or to a slave printer.

In the following example letter, the header VAMC address information is taken from the Prosthetics Site Parameters file.

		Department of Veterans Affairs	
		HINES ISC VAMC	
		BUILDING #37	
		HINES, IL 60141	
MAR 11, 1999		In Reply Refer To: HINES ISC VAMC/121	
PHAEVI ARTHUR		SSN: 715-55-1684	
BELLWOOD, ILLINOIS 60611			
		Pt. IEN	Rx Sequence number
		4946	
		Current Home Oxygen Rx#: 1	
		Rx Expiration Date: JUN 6, 1999	
Dear Mr. ARTHUR			
Welcome to the Home Oxygen Program			
This is the welcome letter containing routine information for any patient entering the program. The contents of this letter are specific to your site. It is created prior to editing the letter information in the site parameters (Site Parameters Enter/Edit) for Home Oxygen.			
Prosthetics Service			

To help you move around through your letter list on any of the Generate Letters screens, there are a number of options available to you. Enter two question marks at the "Select Action" prompt to see them. This functionality is discussed in the Introduction under List Manager Functions.

4. Billing

There are a number of activities associated with billing. This chapter explains how to do the following:

- **Find discrepancies that will affect accurate billing** (Pre-Billing Discrepancy Report option)
- **Correct the discrepancies that affect accurate billing** (See Pre-Billing Discrepancy Report)
- **Create a billing list** (Billing Transactions option)
- **Add patients to the billing list** (Billing Transactions option)
- **Edit patient data after the billing list is created** (Billing Transactions option)
- **Suspend dollar amounts for an item** (Billing Transactions option)
- **Complete/accept the billing** (Billing Transactions option)
- **Sign off the purchase card** (Billing Transactions or Purchase Card Sign Off options)
- **Verify that everything went okay with the posted billing** (Verify Posted Billing Transactions option)

Pre-Billing Discrepancy Report

Always run this report and correct any discrepancies found prior to using the option Billing Transactions. If discrepancies remain unfixed, the patient will not be added to the billing list which can only be created once a month for each vendor.

Find Discrepancies that Affect Accurate Billing

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Billing Month: Enter the month and year you want shown in the report. Examples: February 1999, Feb 99, 2/99, 0299, 2-99.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

HOME OXYGEN PRE-BILLING REPORT			MAR	3,1999	10:20	PAGE 1
Name	SSN	Reason				

BUGSEY, BUNNY	5555	No RX on file				

Correct Discrepancies that Affect Accurate Billing

The following describes the discrepancy and tells you how to correct it.

Different Home Oxygen Contract Location: The Site you enter at the first prompt in this option, is not the same as the Contract Location for the patient shown in the report. If the contract location should be the same, change the location using the Add/Edit Home Oxygen Patient option.

No Home Oxygen Information: There is no eligibility entered for the patient. Enter the patient's eligibility and any other missing home oxygen information using the Add/Edit Home Oxygen Patient option.

Deactivated: The patient was inactivated prior to the billing period. If the patient needs to be reactivated, use the Inactivate/Activate Oxygen Patient option.

No RX on file: The patient has no prescription on file. Enter prescription information using the Add/Edit Home Oxygen Patient option. If the patient is not participating in the program, you may want to inactivate the patient using the Inactivate/Activate Oxygen Patient option.

RX expires prior to billing period: The prescription expired before the selected billing period. If the patient has a new prescription for the period, use the Add/Edit Home Oxygen Patient option to enter the prescription. If not, you may want to inactivate the patient using the Inactivate/Activate Oxygen Patient option.

No items on file: The patient's record shows no items to be billed. Use the Add/Edit Home Oxygen Patient option to add items for the patient.

No items for vendor: There is a vendor attached to the patient record but no item. Use the Add/Edit Home Oxygen Patient option to edit the item for the patient.

Billing Transactions

Note: Run the Pre-Billing Discrepancy Report under the Reports menu to find any records that lack complete or up-to-date information. Correct those discrepancies prior to using this Billing Transactions option. Any incomplete records will not appear on the billing list. The billing list can only be generated once a month for each vendor.

The main purpose of the Home Oxygen Module is to help you manage the billing. This option produces a list of patients that received oxygen therapy over a selected month from a specified vendor. You can use this option to do a number of things, including edit the patient or billing record, accept or unaccept the billing, display the 2319, post the billing, and sign off using a purchase card or 1358.

Create the Billing List

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Enter a site.

Billing Month: Enter the month you want the bill to cover, e.g., 2-1999, 2-99, Feb 99 for February 1999.

Vendor: Select the vendor for which you want the list generated.

A screen similar to the following will appear:

Billing Transactions				Mar 04, 1999 14:19:56			Page:		1 of 29	
Billing Transactions for VENDOR INC for FEB 1999										
	NAME	SSN	EL	PRIMARY ITEM	910	OTHER	SUSP	TOTAL		
1.	AAAAAABBBBB	2020	4	O2 TANK H SYSTEM	40.00	0.00	0.00	40.00		
2.	ABBBBBBBB,A	1111	1	O2 CONCENTRATOR	325.00	300.00	0.00	625.00		
3.	ACCCCCCCC,C	3333	4	O2 NEBULIZER/BUNN SYS	150.00	0.00	0.00	150.00		
4.	ADDDDDDDDD,	4444	4	O2 CONCENTRATOR	182.50	0.00	0.00	182.50		
5.	AFF,JULIUS	5555	4	O2 CONCENTRATOR	162.50	45.00	0.00	207.50		
6.	AGGGG,BILL	6666	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50		
7.	BAAAAAA,FRE	7777	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50		
8.	BBBBBB,J D	8888	4	O2 CONCENTRATOR	182.50	330.00	0.00	512.50		
9.	BCCCCC,KENN	9999	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50		
10.	BDDDDDD,JON	1010	4	O2 CONCENTRATOR	182.50	228.00	0.00	410.50		
Enter ?? for more actions										
Select ACTION:Next Screen// ??										

Note: Entering ?? displays the other options available including the List Manager options for moving about and printing the screens. For information about the List Manager options (+, -, UP, DN, etc.), see List Manager Functions in the Introduction.

Billing Actions

There are a number of actions that you can take while in billing. The following information describes each of the actions.

ET	Edit Patient	AP	Add Billing Patient	DP	Delete Patient Billing
EB	Edit Billing	CV	Change View	UB	Unaccept Billing
AB	Accept Billing	QE	Quick Edit	XB	Post Billing
23	Display 2319	SO	Sign Off Purchase Card		

Correct Data on a Patient Record

ET Edit Patient: If you create the billing list and then discover that some items are not covered in the bill for a patient, you can use this function to edit the information in the patient's record. This option only lets you correct information for patients already on the billing list.

Note: If the patient does not appear on the billing list, run the Pre-Billing Discrepancy report to find out what is missing and correct the record. Then use the Add Billing Patient action described below to add the patient to the list.

Example: In the following list, the user notices that the amount for an item is not showing due to the vendor not being defined for that item. This was determined by using the Pre-Billing Discrepancy report. We can use Edit Patient to add the vendor and correct any other information that is not complete.

Billing Transactions				Jul 04, 1999 14:19:56		Page: 1 of 29		
Billing Transactions for VENDOR INC for JUN 1999								
	NAME	SSN	EL	PRIMARY ITEM	910	OTHER	SUSP	TOTAL
1.	AAAAAABBBBB	2020	4	O2 TANK H SYSTEM	40.00	0.00	0.00	40.00
2.	ABBBBBBBB,A	1111	1	O2 CONCENTRATOR	325.00	300.00	0.00	625.00
3.	ACCCCCCCC,C	3333	4	O2 NEBULIZER/BUNN SYS	150.00	0.00	0.00	150.00
4.	ADDDDDDDDD,	4444	4	O2 CONCENTRATOR	182.50	0.00	0.00	182.50
5.	AFF,JULIUS	5555	4	O2 CONCENTRATOR	162.50	45.00	0.00	207.50
6.	AGGGG,BILL	6666	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
7.	BAAAAAA,FRE	7777	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
8.	BBBBBB,J D	8888	4	O2 CONCENTRATOR	182.50	330.00	0.00	512.50
9.	BCCCCC,KENN	9999	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
10.	BDDDDDD,JON	1010	4	O2 CONCENTRATOR	182.50	228.00	0.00	410.50
Enter ?? for more actions								

Select ACTION:Next Screen// **E**

1 Edit Billing

2 Edit Patient

CHOOSE 1-2: **2** Edit Patient

Enter a list or range of numbers (1-6): **4**

EDITING ADDDDDDDD,JOHN...

HOME OXYGEN ELIGIBILITY: NSC/OP// <ret>

HOME OXYGEN CONTRACT LOCATION: HINES ISC VAMC// <ret>

HOME OXYGEN ACTIVATION DATE: JAN 29,1999// <ret>

Select HOME OXYGEN PRESCRIPTION DATE: 5-1-1999// <ret>

DATE: MAY 1,1999// <ret>

EXPIRATION DATE: OCT 28,1999// <ret>

DESCRIPTION:

No existing text

Edit? NO// <ret>

The following items are already in this patient's template:

* 1 O2 CONCENTRATOR

VENDOR INC.

2 OXYGEN CONTENTS LIQ PER/UNIT

<< VENDOR NOT DEFINED >>

* = Primary Item

Select ACTION: (A/D/E): **e** Edit

Select an ITEM: (1-2): **2** OXYGEN CONTENTS LIQ PER/UNIT

PRIMARY ITEM: NO// **<ret>**

ITEM: OXYGEN CONTENTS LIQ PER/UNIT // **<ret>**

HCPCS CODE: **E0442** OXYGEN CONTENTS LIQ PER/UNIT

VENDOR: **VENDOR INC.** PH:708 666-1000 NO: 71608

ORD ADD:200 VENDOR DRIVE

FMS:

VENDOR, IL 60048

CODE:

FAX:

...OK? Yes// **<ret>** (Yes)

QUANTITY: (**nn**)

UNIT COST: (**\$\$**)

UNIT OF ISSUE: **LB** POUND

ICD9 CODE: **416.8** CHR PULMON HEART DIS NEC

REMARKS: **<ret>**

ITEM TYPE: **X** Repair

Select FUND CONTROL POINT: **913** PROSTHETIC SUPPLIES

The following items are already in this patient's template:

1 CONCENTRATOR VENDOR INC.
* 2 OXYGEN CONTENTS, GASEOUS, PE VENDOR INC.

* = Primary Item

Select ACTION: (A/D/E): **<ret>**

Billing Transactions				Jul 04, 1999 14:19:56		Page:		1 of 29	
Billing Transactions for VENDOR INC									
for JUN 1999									
	NAME	SSN	EL	PRIMARY ITEM	910	OTHER	SUSP	TOTAL	
1.	AAAAAABBBBB	2020	4	O2 TANK H SYSTEM	40.00	0.00	0.00	40.00	
2.	ABBBBBBBB,A	1111	1	O2 CONCENTRATOR	325.00	300.00	0.00	625.00	
3.	ACCCCCCCC,C	3333	4	O2 NEBULIZER/BUNN SYS	150.00	0.00	0.00	150.00	
4.	ADDDDDDDDD	4444	4	O2 CONCENTRATOR	182.50	360.00	0.00	542.50	
5.	AFF,JULIUS	5555	4	O2 CONCENTRATOR	162.50	45.00	0.00	207.50	
6.	AGGGG,BILL	6666	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50	
7.	BAAAAAA,FRE	7777	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50	
8.	BBBBBBB,J D	8888	4	O2 CONCENTRATOR	182.50	330.00	0.00	512.50	
9.	BCCCCC,KENN	9999	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50	
10.	BDDDDDD,JON	1010	4	O2 CONCENTRATOR	182.50	228.00	0.00	410.50	
Enter ?? for more actions									

Select ACTION:Next Screen//

The action corrected the billing list as shown in bold above.

Correct Billing Data and/or Suspend Dollar Amt

EB Edit Billing: You can edit the billing information for a patient using this action. It allows you to add, delete, edit, or zero out an item. This option can also be used to suspend dollar amounts for an item. The patient must be on the billing list.

Example:

Billing Transactions				Jul 04, 1999 14:19:56			Page: 1 of 29	
Billing Transactions for VENDOR INC								
for JUN 1999								
	NAME	SSN	EL	PRIMARY ITEM	910	OTHER	SUSP	TOTAL
1.	AAAAAABBBBB	2020	4	O2 TANK H SYSTEM	40.00	0.00	0.00	40.00
2.	ABBBBBBBB,A	1111	1	O2 CONCENTRATOR	325.00	300.00	0.00	625.00
3.	ACCCCCCCC,C	3333	4	O2 NEBULIZER/BUNN SYS	150.00	0.00	0.00	150.00
4.	ADDDDDDDDD,	4444	4	O2 CONCENTRATOR	182.50	360.00	0.00	542.50
5.	AFF,JULIUS	5555	4	O2 CONCENTRATOR	162.50	45.00	0.00	207.50
6.	AGGGG,BILL	6666	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
7.	BAAAAAA,FRE	7777	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
8.	BBBBBB,J D	8888	4	O2 CONCENTRATOR	182.50	330.00	0.00	512.50
9.	BCCCCC,KENN	9999	4	O2 CONCENTRATOR	162.50	90.00	0.00	252.50
10.	BDDDDDD,JON	1010	4	O2 CONCENTRATOR	182.50	228.00	0.00	410.50
Enter ?? for more actions								

Select ACTION:Next Screen// **eb** Edit Billing

Enter a list or range of numbers (1-6): **1**

AAAAAABBBBB,JOHN 333-55-2020

Current Prescription (#1)

Active Date: FEB 28,1999 Expiration Date: JUL 1,1999

2 liters per minute by nasal cannula, as needed with an "H" tank.

HCPCS	Description	FCP	Qty	Cost	Susp.	Total
1. Ennnn	TANKS H	910	1	40.00	0.00	40.00

TOTAL COST 40.00

Total 910 Charges: 40.00

Total Station FCP Charges: 0.00

Select ACTION: (A/D/E/Z): **??**

Enter a code from the list.

Select one of the following:

A	Add
D	Delete
E	Edit
Z	Zero

(This will zero out the cost of the item without going through edit.)

Zero Out an Item

Select ACTION: (A/D/E/Z): **z** Zero

AAAAAABBBBB,JOHN 333-55-2020

Current Prescription (#1)

Current Prescription (#1)

Active Date: FEB 28,1999 Expiration Date: JUL 1,1999

2 liters per minute by nasal cannula, as needed with an "H" tank.

HCPCS	Description	FCP	Qty	Cost	Susp.	Total
1. Ennnn	TANKS H	910	1	0.00	0.00	0.00

TOTAL COST 0.00

Total 910 Charges: 0.00

Total Station FCP Charges: 0.00

Edit an Item

Select ACTION: (A/D/E/Z): **e** Edit
 PRIMARY ITEM: YES// **<ret>**
 QUANTITY: 1// **<ret>**
 UNIT COST: 0// **60**
 REMARKS: **<ret>**
 SUSPENDED AMOUNT: 0// **<ret>**
 Select FUND CONTROL POINT: 910 PROSTHETIC SERVICES// **<ret>**
 ITEM TYPE: **x** Repair
 UNIT OF ISSUE: EA// **<ret>**
 AAAAAABBBBBB,JOHN 333-55-2020
 Current Prescription (#1)
 Current Prescription (#1)
 Active Date: FEB 28,1999 Expiration Date: JUL 1,1999
 2 liters per minute by nasal cannula, as needed with an "H" tank.

HCPCS	Description	FCP	Qty	Cost	Susp.	Total
1. Ennnn	TANKS H	910	1	60.00	0.00	60.00
TOTAL COST						60.00
Total 910 Charges:						60.00
Total Station FCP Charges:						0.00

Add an Item

Select ACTION: (A/D/E/Z): **a** Add
 Select PROS ITEM MASTER NAME: **3516** OXYGEN
 HCPCS CODE: Ennn OXYGEN CONTENTS GAS PER/UNIT
 ICD9 CODE: **416.8** CHR PULMON HEART DIS NEC
 PRIMARY ITEM: **N** NO
 QUANTITY: **50**
 UNIT COST: **.50**
 REMARKS: **<ret>**
 SUSPENDED AMOUNT: **25**
 SUSPENDED REASON: **NOT DELIVERED ON DATE STATED**
 Select FUND CONTROL POINT: **910** PROSTHETIC SERVICES
 ITEM TYPE: **X** Repair
 UNIT OF ISSUE: **LB** POUND
 AAAAAABBBBBB,JOHN 333-55-2020
 Current Prescription (#1)
 Active Date: FEB 28,1999 Expiration Date: JUL 1,1999
 2 liters per minute by nasal cannula, as needed with an "H" tank.

HCPCS	Description	FCP	Qty	Cost	Susp.	Total
1. Ennnn	TANKS H	910	1	60.00	0.00	60.00
2. Ennnn	OXYGEN	910	25	0.50	25.00	25.00
TOTAL COST						85.00
Total 910 Charges:						85.00
Total Station FCP Charges:						0.00
Total Suspended Charges:						25.00

Delete an Item

Select ACTION: (A/D/E/Z): **Delete**

Select an ITEM: (1-2): **2**
 Are you SURE you want to delete this item? NO// **YES** ...deleted!
 AAAAAABBBBB,JOHN 333-55-2020
 Current Prescription (#1)
 Current Prescription (#1)
 Active Date: FEB 28,1999 Expiration Date: JUL 1,1999
 2 liters per minute by nasal cannula, as needed with an "H" tank.

	HCPCS	Description	FCP	Qty	Cost	Susp.	Total
1.	Ennnn	TANKS H	910	1	60.00	0.00	60.00
TOTAL COST							60.00
Total 910 Charges:							60.00
Total Station FCP Charges:							0.00

Add a Patient to the Billing List

AP Add Billing Patient: If a patient does not appear on the billing list, use the Pre-Billing Discrepancy Report to find out what is missing or incorrect in the patients record. Correct the discrepancy and then use this function to add the patient to the list.

Example:

```
Select ACTION:Quit// ADD   Add Billing Patient
```

```
Select PROSTHETICS PATIENT NAME:      MICKEY,MOUSE      HINES, IL      03-03-6
6      356029999      NO      NSC VETERAN
```

```
Item 19 was added to Billing Transaction....
```

Delete a Patient from the Billing List

DP Delete Patient Billing: This action removes a patient from the selected month's billing list.

Change the Quantity of an Item

QE Quick Edit: Use this action to quickly edit the quantity of an item.

Select ACTION:Quit// qe Quick Edit

Enter a list or range of numbers (1-5): 1

ABFY,HERBERT F 995-19-7641

Current Prescription (#1)

Active Date: FEB 24,1999

Expiration Date: JUL 1,1999

	HCP	PCS	Description	FCP	Qty	Cost	Susp.	Total
1.	E0430		OXYGEN	910	1	500.00	0.00	500.00
2.	A4616		OXYGEN HOSE UNION	910	25	0.75	0.00	18.75

TOTAL COST 518.75

Total 910 Charges: 518.75

Total Station FCP Charges: 0.00

1.	E0430		OXYGEN	910	1	500.00	0.00	500.00
QUANTITY: 1// <ret>								
2.	A4616		OXYGEN HOSE UNION	910	25	0.75	0.00	18.75
QUANTITY: 25// <ret>								

	HCP	PCS	Description	FCP	Qty	Cost	Susp.	Total
1.	E0430		OXYGEN	910	1	500.00	0.00	500.00
2.	A4616		OXYGEN HOSE UNION	910	25	0.75	0.00	18.75

TOTAL COST 518.75

Total 910 Charges: 518.75

Total Station FCP Charges: 0.00

Enter RETURN to continue or '^' to exit:

Accept the Billing

AB Accept Billing: Once you are sure the bill is correct, use this action to Accept the billing. You may accept selected records or a range of records. This places a small "a" before those records that have been accepted.

Select ACTION:Quit// **AB** Accept Billing
Enter a list or range of numbers (1-6): **1**

View Only Accepted or Unaccepted Records

CV Change View: Use this action when you want to limit your list to just those records that are Accepted or Unaccepted. The default view is Both.

Select ACTION:Quit// **cv** Change View
Select one of the following:

A	Accepted
U	Unaccepted
B	Both

Which Transactions would you like displayed?: Both// **u** Unaccepted

Unaccept the Billing

UB Unaccept Billing: If you accepted a billing record in error, you can unaccept it using this action. It removes the small "a".

Select ACTION:Quit// **ub** Unaccept Billing
Enter a list or range of numbers (1-6): **1**

Post the Billing

XB Post Billing: After accepting a billing, you can post it using this action.

Also, anytime you have records that are Accepted, when you exit, you will be asked if you would like to post the bills.

Note: If a purchase card is being used, accepting can be done by multiple people, but posting should only be done by one person. When using a purchase card payment type, do not Post Billing within List Manager. Select Quit and you will see the example below for Purchase Card. A small "p" next to the patient name and a "*" next to an amount indicates that the record is only partially posted.

Hint: If you have not loaded all your home oxygen patients into the program, you can still post those not in the program using the Create a No-Form Daily Record option under Purchasing.

Warning: The purchase card holder must have a monthly purchase limit greater than the total purchase order amount.

Example: (1358 Payment Type)

Select ACTION:Quit// ?

ET	Edit Patient	AP	Add Billing Patient	UB	Unaccept Billing
EB	Edit Billing	CV	Change View	XB	Post Billing
AB	Accept Billing	QE	Quick Edit		
23	Display 2319	SO	Sign Off Purchase Card		

Select ACTION:Quit// **xb** Post Billing

Enter a list or range of numbers (1-10): **1-10**

Are you Sure you Want to Post Transactions? NO// **y** YES

Fund Control Point: 910 PROSTHETIC SERVICES

Select Fund Control Point: **910** PROSTHETIC SERVICES 499-C35010 8509.75
PAYMENT TYPE: ?

Enter 1 for 1358 or P for Purchase Card.

Choose from:

1	1358
P	PURCHASE CARD

PAYMENT TYPE: **1358**

Select Obligation Number: C35010 499-C35010 09-08-93 1358 Obligated - 1358
FCP: 910 \$ 10000.00

Are you sure? NO// **YES**

910 PROSTHETIC SERVICES ...Posted

Fund Control Point: 913 PROSTHETIC SUPPLIES

Select Fund Control Point: **913** PROSTHETIC SUPPLIES 499-C35009 7900.00
PAYMENT TYPE: **1358**

Select Obligation Number: C35010 499-C35010 09-08-93 1358 Obligated - 1358
FCP: 913 \$ 10000.00

Are you sure? NO// **YES**

913 PROSTHETIC SUPPLIES ...Posted

All Fund Control Points posted successfully

Press any Key to Continue: **<ret>**

Example: (Purchase Card Type)

```
Select ACTION:Quit// ?
ET  Edit Patient          AP  Add Billing Patient  UB  Unaccept Billing
EB  Edit Billing           CV  Change View          XB  Post Billing
AB  Accept Billing         QE  Quick Edit
23  Display 2319          SO  Sign Off Purchase Card
Select ACTION:Quit// <ret>  QUIT
```

There are patients whose billing transactions have been accepted
and not yet posted
Would you like to post them now? NO// YES

Are you Sure you Want to Post Transactions? NO// YES

Fund Control Point: 910 PROSTHETIC SERVICES
Select Fund Control Point: <ret>
PAYMENT TYPE: ?

Enter 1 for 1358 or P for Purchase Card.
Choose from:
1 1358
P PURCHASE CARD

PAYMENT TYPE: **PURCHASE** CARD

ENTER A NEW PURCHASE ORDER NUMBER OR A COMMON NUMBERING SERIES
PURCHASE ORDER: **499-P7** PC AUTHORIZED BUYER
Are you adding '499-P70151' as a new Purchase Order number ? **Y** (YES)
PURCHASE CARD NAME: **VISA** VISA-CARD
COST CENTER: 827300// **Orthotics Laboratories**
Are you sure? NO// YES

910 PROSTHETIC SERVICES ...Posted

Fund Control Point: **913** PROSTHETIC SUPPLIES
Select Fund Control Point: <ret>
PAYMENT TYPE: **PURCHASE** CARD

ENTER A NEW PURCHASE ORDER NUMBER OR A COMMON NUMBERING SERIES
PURCHASE ORDER: **499-P7** PC AUTHORIZED BUYER
Are you adding '499-P70152' as a new Purchase Order number ? **Y** (YES)
PURCHASE CARD NAME: **VISA** VISA-CARD
COST CENTER: 827300// **Orthotics Laboratories**
Are you sure? NO// YES

913 PROSTHETIC SUPPLIES ...Posted

All Fund Control Points posted successfully
Press any Key to Continue: <ret>

Sign Off on the Purchase Card

SO Sign Off Purchase Card: Use this action to sign off on purchase card transactions.
If you have posted more than one

Select ACTION:Quit// **SO** Sign Off Purchase Card
PAYMENT TYPE: **PURCHASE CARD**
Select FUND CONTROL POINT: **910** PROSTHETIC SERVICES P70148

Verifying all items posted for FCP. Please be patient.
Sure you want to Continue? **YES**
Enter ELECTRONIC SIGNATURE CODE: (**Enter your electronic signature code**)
Thank you.
Cost of this request: \$\$\$\$.00
Current Control Point Balance: \$\$\$\$\$.00

View the 2319

23 Display 2319: Use this action to view the 2319. Screen #8 of the 2319 contains the home oxygen information.

Select ACTION:Quit// **23** Display 2319

Enter a number (1-5): **2**

*Comments on file

Current Disability Codes are:

COS/B SC VIETNAM S/C

AMP/LSD SC VIETNAM S/C

Deleted...

AMP/LPH OTHERS ELIG NSC PL-96-151

Enter 10-2319 screen to VIEW (1-8), '^' to EXIT, or 'return' to continue: **8**

HOME OXYGEN ITEMS

BUGSEY,BENJAMIN 333-55-5555

Current Prescription (#1)

Active Date: FEB 28,1999 Expiration Date: JUL 1,1999

2 liters per minute by nasal cannula, 24 hours a day, with an oxygen concentrator, 6 "E" tanks, 2 "D" tanks, and an "H" tank as the emergency back up system.

Enter RETURN to continue or '^' to exit: <ret>

Date	Qty	Item	Type	Vendor	Sta	Serial	Delivery Date	Tot Cost
1. 05/12/99	1	TANKS E PO		VENDOR	499		05/26/99	50.00
2. 05/12/99	1	TANKS E PO		VENDOR	499		05/26/99	50.00

End of Home Oxygen records for this veteran!

+=Turned-In *=Historical Data I=Initial X=Repair S=Spare R=Replacement

Enter 1-2 to show full entry, '^' to exit or 'return' to continue. **1**

BUGSEY,BENJAMIN SSN: 333-55-5555 SUPPORT ISC DOB: 01-01-1918
APPLIANCE/REPAIR LINE ITEM DETAIL <4-1>

TYPE OF FORM: OTHER INITIATOR: DAYON,RAFE DATE: MAY 12, 1999@08:48:34

DELIVER TO:

TYPE TRANS: QTY: 1 SOURCE: COMMERCIAL

VENDOR: VENDOR INC.

VENDOR PHONE: 708/680-1000

200 VENDOR DRIVE

LIBERTYVILLE, ILLINOIS 60048

DELIVERY DATE: MAY 26, 1999@06:12:05

TOTAL COST: \$50.00 OBL: 499-C35010-0070

REMARKS:

DISABILITY SERVED: NSC/OP

APPLIANCE: TANKS E PORTABLES

PSAS HCPCS: E0420 OXYGEN CYLINDER, DEMURRAGE O

DESCRIPTION:

EXTENDED DESCRIPTION:

Enter RETURN to continue or '^' to exit:

1. 05/12/99	1	TANKS E PO	HOLLISTER	499		05/26/99	50.00
2. 05/12/99	1	TANKS E PO	HOLLISTER	499		05/26/99	50.00

End of Home Oxygen records for this veteran!

+=Turned-In *=Historical Data I=Initial X=Repair S=Spare R=Replacement

Enter 1-2 to show full entry, '^' to exit or 'return' to continue.

*Comments on file

Current Disability Codes are:

COS/B	SC VIETNAM	S/C	
AMP/LSD	SC VIETNAM	S/C	Deleted...
AMP/LPH	OTHERS ELIG	NSC	PL-96-151

Select one of the following:

- 1 PATIENT DEMOGRAPHICS
- 2 CLINIC ENROLLMENTS/CORRESPONDENCE
- 3 ENTITLEMENT INFORMATION
- 4 APPLIANCE TRANSACTIONS
- 5 AUTO ADAPTIVE INFORMATION
- 6 CRITICAL COMMENTS
- 7 ADD/EDIT DISABILITY CODE
- 8 HOME OXYGEN ITEMS

Enter 10-2319 screen to VIEW (1-8), '^' to EXIT, or 'return' to continue :

Purchase Card Sign Off

Use this action to sign off on a purchase card transaction. This action can also be taken using the option Billing Transactions.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Billing Month: Enter the month you want to review, e.g., 2/99, 0299, Feb 99 for February 1999.

Payment Type: Enter the method of payment for the fund control point. Payments for home oxygen are done by purchase cards or 1358 service orders. Select one of the following:

1 1358
P PURCHASE CARD

Fund Control Point: Through which FCP will this purchase be handled? Enter the FCP here.

Example:

```
SITE: HINES ISC VAMC// <ret> 499
Select BILLING MONTH: 2-1998
PAYMENT TYPE: ??
```

Enter 1 for 1358 or P for Purchase Card.

Choose from:

1 1358
P PURCHASE CARD

```
PAYMENT TYPE: P PURCHASE CARD
Select FUND CONTROL POINT: 910 PROSTHETIC SERVICES P70134
```

Verifying all items posted for FCP. Please be patient.

Sure you want to Continue? Y YES

Enter ELECTRONIC SIGNATURE CODE: (Enter your signature code)

Thank you.

Cost of this request: \$\$\$\$50

Current Control Point Balance: \$\$\$\$50

Verify Posted Billing Transactions

After posting billing transactions, a bill might be posted in IFCAP but fail to be posted to the patient's 2319. Use this option as often as needed to make sure that all records get posted to the 2319.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Enter a site.

Billing Month: Enter the month you want to review, e.g., 2-1999, 2-99, Feb 99 for February 1999. This field only accepts months that have been posted.

Vendor: Select the vendor.

If nothing fails, you get the following notification.

```
Processing...  
Everything posted okay!!
```


5. Reports

There are a number of reports to help you manage your home oxygen program.

Alphabetical List Home Oxygen Patients (by site): This is a listing of active home oxygen patients for a selected site. The report also shows the date the current prescription expires.

Active Home Oxygen Patients (Alpha by Zip Code): This is a listing of active patients with their address information.

Prescription Expiration Dates: This is a listing of active patients sorted by the expiration dates for their current prescriptions.

Inactive Home Oxygen Patients (by Inactive date): This is a listing of inactive patients and the reason they were inactivated.

Primary Item Report: This is a report of active patients listing the primary item, quantity of the item, and cost.

Monthly Home Oxygen Billing: This report lists billings for all active home oxygen patients.

New Patients: This is a report of all new patients for a selected date range.

Prescription Report: This report includes HCPCS/items, quantity, cost, extended cost, and the fund control point.

Pre-Billing Discrepancy Report: This report should be run and any discrepancies corrected prior to creating a billing list for a month. If there are any discrepancies for a patient, then that patient will not appear on the billing list.

Reports ...

Alphabetical List Home Oxygen Patients (by site)

This is an alphabetical listing of active home oxygen patients for a selected site. The report also displays the primary item, the date the patient was last activated, and the date the current prescription expires.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

MAR 3,1999 08:09		HINES ISC VAMC		Page: 1	
		Home Oxygen Patients			
				Date Current	Prescription
Patient	SSN	Primary Item	Active	Expires	
=====	=====	=====	=====	=====	
AANG,CLIFFORD	7380	CONCENTRATOR	02/22/99	05/23/1999	
ABBB,HERBERT F	7641	CONCENTRATOR	02/24/99	05/25/1999	
AHH,POW	2043	CONCENTRATOR	02/19/99	05/20/1999	
...					
Total Patients:				8	

Reports ...

Active Home Oxygen Patients (Alpha by Zip Code)

This is a list of addresses, sorted by the zip code, for active home oxygen patients.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

MAR 3,1999	08:25	HINES ISC VAMC		Page: 1
Active Home Oxygen Patients by Zip Code				
Zip Code	Name/Phone Number	SSN	Address	
=====	=====	=====	=====	
60067	SHHHH,CLARENCE	0196	123 WAYFARER RD WORTHINGTON ,IL	
60141	TEEE,JOE 708-447-1234	9999	3455 WEST HAVEN ST. HINES ,IL	
60148	THUNDERPAWS,MAX	4444	123 E PRAIRIE LOMBARD ,IL	
...				
Total Patients:				9

Reports ...

Prescription Expiration Dates

This list is sorted by the prescription expiration date and displays the patient, SSN, primary item, and the date the patient was last activated.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

MAR 3,1999 09:13		HINES ISC VAMC		Page: 1	
		Prescription Expiration Date			
Date Current					
Prescription					
Expires	Name	SSN	Primary Item	Active	
=====	=====	=====	=====	=====	
02/23/1999	TEEE,BACK	7899	CONCENTRATOR	02/19/99	
05/02/1999	TAAA,JOE	9999	CONCENTRATOR	01/01/99	
05/20/1999	AHH,POW	2043	CONCENTRATOR	02/19/99	
...					
Total Patients:				8	

Reports ...

Inactive Home Oxygen Patients (by Inactive date)

This is a list of inactive patients sorted by the dates the patients were inactivated.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Start at INACTIVATION DATE: This is the beginning date of the date range for the report.

Ending INACTIVATION DATE: This is the ending date of the date range for the report.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

MAR 3,1999 09:19	HINES ISC VAMC				Page: 1
Inactive Home Oxygen Patients					
Date Range: SEP 04, 1998 to MAR 03, 1999					
Patient	SSN	Active	Inactive	Inactive Reason	
=====	=====	=====	=====	=====	
ACBZ,RICHARD L	4620	02/24/1999	02/24/1999	INPATIENT STATUS	
TEST,BARNEY	7777	02/17/1999	03/02/1999	Rx EXPIRED	
TOTAL PATIENTS:				2	

Reports ...

Primary Item Report

This report is sorted by the primary item and displays the patient name, SSN, primary item, quantity of the item, unit cost and total cost.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

MAR 3,1999 09:39		HINES ISC VAMC		Page: 1	
		Primary Item Report			
Patient	SSN	Primary Item	Qty	Unit Cost	Total Cost
=====	=====	=====	=====	=====	=====
Primary Item: CONCENTRATOR					
AANG,CLIFFORD	7380	CONCENTRATOR	1	450.00	450.00
ABFY,HERBERT F	7641	CONCENTRATOR	1	500.00	500.00
SHAMO,CLARENCE	0196	CONCENTRATOR	1	450.00	450.00
TEST,BACK	7899	CONCENTRATOR	1	500.00	500.00
THUNDERPAWS,MAX	4444	CONCENTRATOR	1	500.00	500.00
Primary Item: TANKS E PORTABLES					
ASH,POW	2043	TANKS E PORTABLES	1	50.00	50.00
BUGS,BUNNY	5555	TANKS E PORTABLES	1	50.00	50.00
TEST,BARNEY	7777	TANKS E PORTABLES	1	50.00	50.00
Total Patients:					8

Reports ...

Monthly Home Oxygen Billing

This prints a list of active patients with their home oxygen costs displayed by FCP and any suspended dollars .

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Billing Month: Enter the month and year you want shown in the report. Examples: February 1999, Feb 99, 2/99, 0299, 2-99.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

MAR 3,1999 09:46		HINES ISC VAMC			Page: 1			
FEB 1999 Monthly Home Oxygen Billing								
				Station				
				Fund Control				
ACC Name	SSN	Vendor	910	Point	Other	Susp	Total	

	AANG	7380	VENDOR INC.	-	200.75	-	-	200.75
	ABFY	7641	VENDOR INC.	518.75	-	-	-	518.75
	TEST	7899	VENDOR INC.	50.00	-	-	-	50.00
a#	TEST	7777	VENDOR INC.	272.00	-	-	-	272.00
	TEST	9999	VENDOR INC.	80.00	-	-	-	80.00
			Totals:	920.75	200.75	-	-	1121.50
Total Patients:				5				

Note: **a** = accepted.

= posted completely

p = partially posted (one FCP, but not both)

Reports ... New Patients

This is a list of new patients, not necessarily new to the program but their last activation date falls within the date range selected for the report.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Start date: The default start date is the first day of the month you are in. This date may be changed to another. It is assumed the end date is "today".

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

MAR 3,1999 09:55	HINES ISC VAMC		Page: 1
	New Patient Report		
Patient	SSN	Primary Item	Activation Date
=====	=====	=====	=====
SHAMO, CLARENCE	0196	CONCENTRATOR	MAR 2,1999
TEST, BARNEY	7777	CONCENTRATOR	MAR 3,1999
THUNDERPAWS, MAX	4444	CONCENTRATOR	MAR 2,1999
TOTAL PATIENTS:			3

Reports ...

Prescription Report

This report includes HCPCS/items, quantity, cost, extended cost, and the fund control point for a selected patient or all patients.

Site: This prompt only appears if your Prosthetics Service covers multiple stations. Entering "?" will bring up a list of sites. Select a site.

Select All Patients? You may select all patients (YES) or a single patient (NO).

Prosthetics Patient: If you choose to select a single patient, enter the patient name at this prompt. Enter the patient's name as LAST,FIRST or first initial last name plus last 4 digits of the SSN.

Device: Hit the <ret> key to bring the report to your screen or enter the name of a printer to obtain a hard copy report.

MAR 9,1999 12:39		HINES ISC VAMC		Page: 1	
Prescription Report					
Name		SSN	Activation Date	Date Current	Prescription Expires
=====		====	=====	=====	=====
PHHHHH,ARTHUR		1111	MAR 8,1999	JUN 6,1999	
This is a full description of how much, how often and how the oxygen should be delivered to the patient according to the prescription.					
VENDOR, INC.					
				Extended	Fund
HCPCS	Item	Qty	Unit Cost	Cost	Control
----		---	-----	----	-----
E1401	OXYGEN	1	140.00	140.00	910
E0424	TANKS E PORTABLES	1	22.50	22.50	910
E0443	TANKS E PORTABLES	3	15.00	45.00	910
			Total Cost	207.50	
Inactivation Date:					
Inactivation Reason:					

Total Patients:					1

Reports ...

Pre-Billing Discrepancy Report

See Pre-Billing Discrepancy Report under Billing.

6. Glossary

1358	The computerized record of obligations during a set time frame. This form allows a financial obligation to be set up in the system.
2319	The computerized form on which a patient's Prosthetics data is accepted.
Accept	The act of marking a patient's monthly home oxygen bill as having been checked and correct.
Activation Date	Date the patient began home oxygen treatment. If patient becomes inactivated (see Inactivation Reason) this may also be the date the patient is reactivated.
AMA	American Medical Association.
Concentrator	A device that extracts the nitrogen from the air we breathe and outputs 88 to 93% pure oxygen for patients to breathe.
Contract Location	The site that administers the contract.
Cost	Charge per unit in dollars and cents.
CPT	Current Procedural Terminology codes published by the AMA.
Default Days to Expiration	The expiration date of the prescription will default to the contents of this field by adding this number of days to the Prescription Date when the user initially enters a new prescription.
Eligibility	Home Oxygen eligibility is one of the following: 1 = SC/OP 2 = SC/IP 3 = NSC/IP 4 = NSC/OP
Eligibility, Special Category	A subcategories of the NSC/OP: 1 = Special Legislation 2 = A & A 3 = PHC 4 = Eligibility Reform
FCP	Fund Control Point.

HCPCS	Healthcare Financing Administration Common Procedure Code System. A code that represents an item or service. Can also be PSAS HCPCS code created by the Data Validation Committee.
H.O.	Home Oxygen (From Section 3.1.3).
ICD9 Code	International Classification of Diseases code. A code that represents the primary diagnosis for which oxygen treatment is prescribed for the patient.
IEN	Internal Entry Number (From Section 3.5.2.1 – Purchase Order field).
IFCAP	The financial system in VISTA that records information about obligations, purchase cards, etc.
Inactivation Date	The date the patient's home oxygen treatment is discontinued.
Inactivation Reason	Why the treatment is cancelled or not started: D = Discontinued by Patient R = Rx Expired M = MD Discontinued P = Patient Deceased I = Inpatient Status E = Entered in Error
Item	Something that can be issued to a patient. Multiple items may be associated with one HCPCS.
Item, Primary	The item that is most important to the patient's care; denotes what kind of treatment the patient is getting. The main component of the equipment.
Item Type	A first time issue of the item, replacement of the item, or repair of the item: I = Initial issue R = Replace X = Repair
JCAHO	Joint Committee on the Accreditation of Healthcare Organizations
Liquid system	A tank of oxygen gas in liquid form.
PCO	Purchase Card Order.

PHC	Sub-category of NSC/OP Eligibility.
PO	Purchase Order.
Post	This process creates and updates a 2319. It also sends home oxygen patient billing transactions to the IFCAP system so that they will be officially recorded and paid, reducing the obligated amount available to be spent.
Prescription	A physician order for treatment/service/medication for the patient.
Prescription Date	Date that the prescription is written.
Prescription Expiration Date	Date that the prescription is no longer valid.
Prescription Sequence Number	This is the internal identification number of a prescription. Each prescription in sequence will have a different life-time. The 1 st prescription may expire in 6 months, the 2 nd in another 6 months, the 3 rd in 12 months, the 4 th in 24 months. As users enter prescriptions for patients, the system will try to calculate the correct expiration date for it based on the "Default Days to Expiration" field value.
Prosthesis	A man-made device that replaces functionality that was originally a natural capability of the body.
Quantity	The number of units issued.
SRS	Software Requirements Specification.
Suspended	When a Home Oxygen provider bills the VAMC for services or supplies and the VAMC does not recognize the charges as liquidated and does not pay them, such charges are said to be suspended.
Unit of Issue	How the item is issued, e.g., box, each, bottle, liter, etc.
VA	Department of Veterans Affairs.
VAMC	VA Medical Center.
Vendor	The company from which the item is purchased.
VISN	Veterans Integrated Services Network.

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